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FILING DATE 07/05/2006 6713/PCT 10/574.961 Stefan Knackmuss TITLE OF INVENTION: SINGLE-CHAIN ANTIBODY ACTING AGAINST 37 KDA/67 KDA LAMININ RECEPTOR AS TOOLS FOR THE DIAGNOSIS AND THERAPY OF PRION DISEASES AND CANCER, PRODUCTION AND USE THEREOF PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE APPLN. TYPE SMALL ENTITY ISSUE FEE DUE \$300 12/15/2008 YES -\$720-\$755 nonprovisional **EXAMINER** ART UNIT CLASS-SUBCLASS 01 FC:2501 755.00 OP 300.00 OP 424-135100 02 FC:1504 BOESEN, AGNIESZKA 1648 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list 1 Breiner & Breiner, LLC (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Heidelberg, Germany Affimed Therapeutics AG Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 😾 Corporation or other private group entity 🚨 Government 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) 4a. The following fee(s) are submitted: A check is enclosed. Issue Fee Payment by credit card. Form PTO-2038 is attached. Publication Fee (No small entity discount permitted) The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02-3690 (enclose an extra copy of this form). ☐ Advance Order - # of Copies 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ■ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. November 10, 2008 Authorized Signature 33,161 Mary J. Breiner Registration No. Typed or printed name

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